T. R. FORM NO. 33
[See sub-rule (1) of T. R. 4.196]

Bill for scholarship/stipends payable to College/School during the month of 20
(Primary, Junior High/Secondary/Higher Secondary School, Junior/Senior/Higher Madrasa, Anglo Indian, Primary/Secondary School Scholarship to be drawn in separate bill)

Name of the Office ________________________________
D.D.O. Code ____________________________
Token no. __________________ Date / / 
Bill No. __________________ Date / / 
T.V. No. __________________ Date / / 
Head of Account Code ________________________________

(1) Name of institution ____________________________ for (month and year)
(2) ____________________________ Class of scholarship/stipend

<table>
<thead>
<tr>
<th>No. and date of the order sanctioning the scholarship or stipend</th>
<th>Name of the scholarship or stipend holder</th>
<th>Period of terms From</th>
<th>To</th>
<th>Monthly value of stipend or scholarship</th>
<th>Bill Amount</th>
<th>Deductions Cause</th>
<th>Amount Rs.</th>
<th>Amount withheld Rs.</th>
<th>Net amount drawn Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>(2)</td>
<td>(3) (4)</td>
<td>(5)</td>
<td>(6)</td>
<td>(7)</td>
<td>(8)</td>
<td>(9)</td>
<td>(10)</td>
<td>(11)</td>
</tr>
</tbody>
</table>

Total...

Deduct-Balance undisbursed from last month

Balance due...

Pay Rupees (in words) ____________________________ only as per beneficiary list enclosed.
Certified that the scholarship or stipend holder named in the bill have been regular in attendance and have conformed to the rules under which their scholarships or stipends are payable.

Certified also that the scholarship or stipend drawn on the last bill with the exception of those refunded by deduction have been paid to the proper person and their receipt taken in acquaintance rolls kept in my office.

Certified that the amount claimed in this bill was not drawn before and both office copy and fair copy of the bill agree with each other.

Grant for the year Rs. ____________
Expenditure already incurred including the present bill is Rs. ____________
Balance Available. ____________

For use at the Treasury
Pay Rs. ____________ (Rupees ____________) only
as per beneficiary list enclosed.
Examined and entered.

Accountant/J.A.O. ____________
Dated ____________ 20 ____________

For use in Accountant General (Audit), West Bengal's Office

Admitted for Rs. ____________
Objected to Rs. ____________
Reason for objection ____________

Auditor ____________ S.O./A.A.O. ____________ Audit Officer ____________

Station ____________ Signature of D.D.O ____________
Dated ____________ Designation ____________